## Main Office

116 Hampton Road Southampton, NY 11968

**Phone:** (631) 287-5740 **Fax:** (631) 283-5606

## **Town of Southampton**



## OFFICE OF TOWN CLERK SUNDY A. SCHERMEYER

**Town Clerk Annex** 25 Ponquogue Avenue Hampton Bays, NY 11946

**Phone:** (631) 723-2712 **Fax:** (631) 723-3080 www.southamptontownny.gov

Enter all information requested below. Sign & mail the application to Sundy Schermeyer, Town Clerk, Town of Southampton, 116 Hampton Road, Southampton, NY 11968.

\*\*\* Please Include: (1) Current Rabies Certificate (2) Spay/Neuter Certificate (3) Check for license fee made payable to: Town of Southampton \*\*\*

	☐ New License ☐ Renewal	I
Owner Name:	(Owners 62-yrs or older	qualify for Senior Rates – PROOF REQUIRED)
Street Address:	City:	Zip:
Mailing Address, if different:		
Telephone:	Email Address:	
Dog Name:		
Breed:	Color / Markings:	
	<u>Veterinarian Information</u>	
Name of Veterinarian:	Phone Num	nber:
Address:		
Date of Rabies Vaccination:		3-Years
Rabies Vaccine Manufacturer:	Identifier or Markin	gs:
SPAYE UNSPA UNSPA	LICENSE FEES for male or female of D/NEUTERED dogs: \$ 7.50/yr; Senior Rate YED/UNNEUTERED dogs: \$ 17.50/yr; Senior Rate YED/UNNEUTERED under 4 months of ago WAR, HEARING, POLICE WORK, or SERVICE *Proof required: NYS-recognized training	e: \$ 5.00/yr ior Rate: \$ 15.00/yr e: \$ 12.00 E dogs* <b>NO FEE</b>
Number of years licensed:	Total amount paid:	
Owner Signature:		Date: